

State of Hawaii

Accounting Manual

Volume II: Budgetary Control Accounting

Part 300 - 500: Expenditures

Page 525.01

SECTION 525: PERSONAL AUTOMOBILE MILEAGE VOUCHER, SAFORM C-33

1. Purpose. This form is used to document a State officer's, employee's, or other authorized representative's personal automobile mileage and parking expenses while on official business, and to process allowable reimbursement from the State.
2. Prepared By. State officer, employee, or other authorized representative of the State who is entitled to reimbursement for use of the individual's personal automobile.
3. Frequency. As required, but no less frequently than monthly.
4. Distribution.
 - (a) Copy #1 - Attached as a supporting document to SUMMARY WARRANT VOUCHER submitted to DAGS Accounting Division.
 - (b) Other Copies - As required by respective departments or agencies.

July 1, 1979

SECTION 525: PERSONAL AUTOMOBILE MILEAGE VOUCHER, SAFORM C-33

ITEM NO.	DATA AND DATA INSTRUCTIONS
	NOTE: Reference to "employee" in this section refers to any State official, employee, or other authorized representative.
①	DOCUMENT CONTROL NO.* - (Optional).
②	MONTH OF <u> </u> 19 <u> </u> - Enter the month and year when the automobile mileage expense was incurred.
③	DEPARTMENT/DIV. - Enter the names of department and division of the employee in whose behalf the mileage expense was incurred.
④	YEAR & MAKE - Enter the year and make of the car used in official business.
⑤	MODEL & TYPE - Enter the model and type of car used in official business.
⑥	NO. OF CYL.* - (Optional).
⑦	BRANCH/SECTION*- (Optional).
⑧	UNIFORM ACCOUNTING CODE*- (Optional).
⑨	AMOUNT - Enter the amount charged to each appropriation account.
⑩	SUBMITTED BY (PRINT NAME) - Print or type the name of the employee requesting the mileage expense reimbursement.
⑪	POSITION TITLE - Enter the employee's position title.
⑫	SOCIAL SECURITY NO. - Enter the employee's social security number.
⑬	BARGAINING UNIT CODE - Enter the bargaining unit code of the employee.
⑭	MO./DAY - Enter the month and day the mileage expense was incurred for each line entry.
⑮	TRIP NUMBER - Assign a number for each trip, starting with the number "1" for each month.
⑯	FROM - Enter the location <u>from</u> where the trip started.

SECTION 525: PERSONAL AUTOMOBILE MILEAGE VOUCHER, SAFORM C-33

ITEM NO.	DATA AND DATA INSTRUCTIONS
(17)	TO - Enter the location where the trip ended.
(18)	REMARKS - Enter the reason for each trip.
(19)	MILES TRAVELED - Enter the number of miles traveled for each trip.
(20)	TOTAL MILEAGE - Enter the total number of miles traveled on this voucher claim.
(21)	RATE: _____¢ - Enter the authorized basic mileage rate. The basic mileage rate may vary according to the employee's bargaining unit contract or other authorization.
(22)	first _____ miles - Enter the authorized basic mileage (distance).
(23)	\$ _____ - Enter the computed reimbursable amount of the basic mileage.
(24)	_____¢ - Enter the authorized excess mileage rate. The excess mileage rate may vary according to the employee's bargaining unit contract or other authorization.
(25)	excess of _____ miles - Enter the authorized excess mileage (distance).
(26)	\$ _____ - Enter the computed reimbursable amount for the excess mileage.
(27)	TOTAL MILEAGE CLAIM...\$ _____ - Enter the sum of the basic mileage amount (Item (23)) and the excess mileage amount (Item (26)).
(28)	PARKING FEES...\$ _____ - Enter the total amount of parking fees paid by the employee and being claimed for reimbursement.
(29)	TOTAL CLAIM FOR REIMBURSEMENT...\$ _____ - Enter the total amount to be claimed for reimbursement (Total of Items (27) and (28)).
(30)	* _____ - Signature and title of the person authorized to certify that funds are available for this payment. (Optional). (SIGNATURE) (TITLE)
(31)	_____ - Signature and title of the person authorized to approve the employee's automobile mileage reimbursement. (SIGNATURE) (TITLE)

State of Hawaii

Accounting Manual

Volume II: Budgetary Control Accounting
Part 300 - 500: Expenditures

Page 525.04

SECTION 525: PERSONAL AUTOMOBILE MILEAGE VOUCHER, SAFORM C-33

ITEM NO.	DATA AND DATA INSTRUCTIONS
(32)	_____ - Enter the name of the insurance company that insured (INSURANCE COMPANY) the automobile.
(33)	POLICY NO. _____ - Enter the policy number of the automobile insurance.
(34)	EXPIRATION DATE _____ - Enter the expiration date of the automobile insurance policy.
(35)	EMPLOYEE'S SIGNATURE _____ - Signature of the employee.

July 1, 1979

SECTION 525: PERSONAL AUTOMOBILE MILEAGE VOUCHER, SAFORM C-33

STATE OF HAWAII																									
PERSONAL AUTOMOBILE MILEAGE VOUCHER																									
DOCUMENT CONTROL NO. * (1)		MONTH OF 2 19		DEPARTMENT/DIV. (3)																					
YEAR (4)		MODEL (5)		NO. OF CYL. (6)		BRANCH/SECTION * (7)																			
UNIFORM ACCOUNTING CODE * (8)						SUBMITTED BY (PRINT) (NAME) (10)																			
TR		YR		APP		D		S/D		OBJ		FUNC		L		PROJ		(9) AMOUNT		POSITION TITLE (11)		SOCIAL SECURITY NO. (12)		BARGAINING UNIT CODE (13)	